Federal Deposit Insurance Corporation

| | BANKRU | OPICY BUL |)GE I | | | | |
|--|--|---------------------------------------|-----------------|--------------------------|--------------------------|-----------|--|
| Matter No. | Matter Cap | Matter Caption | | | | | |
| Institution No. | Institution Type Bank Thrift | Firm Name | n Name | | | | |
| PART I: BANKRUPTCY I | BUDGET INFORMATION | • | | | | | |
| Attorneys' Fees | | | | Estimated Recovery Value | | | |
| Hourly Rate Fixed Fee \$ | | | | | | | |
| TOA Fee \$ | Contingent Fee% | of \$ | | \$ | | | |
| | Budget Phase | | | Fees | Expenses | Total | |
| PHASE I: Investigation and | Initial Pleadings | | | | | | |
| Legal fees and expenses to the first meeting of creditors | be incurred from the date of filings. | g of debtor's pe | tition to | | | | |
| Estimated Hours For Completion | 1 | | | | | | |
| Estimated Completion Date (MM | //DD/YY):// | | | | | | |
| PHASE II: Pre-Confirmatio | n/Discharge Pleadings, Motions & | & Discovery | | | | | |
| Legal fees and expenses to the date debtor is discharge | be incurred from the date the pro ed or debtor's plan of reorganization | oof of claim is fi on is confirmed | led to | | | | |
| Estimated Hours For Completion | 1 | | | | | | |
| Estimated Completion Date (MM/DD/YY:/_/_ | | | | | | | |
| PHASE III: Post-Confirmation \$5,000 | on/Post Discharge/Fixed Fee and | d/or Fees unde | r | | | | |
| Legal fees and expenses to be incurred from the date debtor is discharged or debtor's plan is confirmed, but excluding any appellate actions, foreclosures, or other non-bankruptcy matters. | | | | | | | |
| Estimated Hours For Completion | 1 | | | | | | |
| Estimated Completion Date (MM/DD/YY):/_/_ | | | | | | | |
| | Grand Total of All I | Bankruptcy Ph | ases* | | | | |
| A Budget Worksheet must also be completed | prior to budget approval (1) if the grand total for all phase | | | by an FDIC Attorney. | <u> </u> | | |
| When Adversary Proceedings are required, a INFORMATION (Part I). | separate Legal Matter record must be created, and the | ne budget information for | that proceeding | g must be reported or | n LITIGATION/PLS/ADVERSA | RY BUDGET | |
| | ENDED BUDGET ACKNOWLED | | | | | | |
| Legal Division is required for | get information contained herein is or any increase in the total budget | amount. | | | and written approv | al of the | |
| Authorized Law Firm Delegate's Signature Date (MI | | | | M/DD/YY) | | | |
| Name and Title of Authorize | ed Law Firm Delegate (Please type | e or print) | | | | | |
| Telephone Number (Include | F | FAX Number (Include area code) | | | | | |
| | | | | Fees | Expenses | Total | |
| | Grand Total of All B | | | | | | |
| | HORIZATION FOR OUTSIDE CO | OUNSEL TO | PROCEE | D | | | |
| FDIC Legal Division Approv | | | | | | | |
| FDIC Attorney (Recommend | ling approval of budget) | D | ate Budge | et Approved (MM/DD/YY) | | | |
| Signature of Delegated Authority Date Bud | | | | get Approved (MM/DD/YY) | | | |
| | Disclosure of Esti | imated Reporting Bu | ırden | | | | |

Public reporting burden for this collection of information is estimated to average 0.5 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Assistant Executive Secretary, Office of the Executive Secretary, Room 4062, FDIC Washington, D.C. 20429; and to the Office of Management and Budget, Paperwork Reduction Project, Washington, D.C. 20503.